PTO/SB/30 (09-04)

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Request For Continued Examination (RCE) Transmittal

Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Application Number	09/291,358
Filing Date	April 14, 1999
First Named Inventor	Kenji MASAKI
Art Unit	2623
Examiner Name	Anand P. Bhatnagar
Attorney Docket Number	325772009600

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

a. X Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on ii. X Other Amendment After Final Amendment filed January 3, 2005 b. Enclosed i. Amendment/Reply iii. Information Disclosure Statement (IDS) ii. Affidavit(s)/Declaration(s) iv. Other 2. Miscellaneous a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) b. Other 3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. a. X The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 03-1952 . I have enclosed a duplicate copy of this sheet. i. X RCE fee required under 37 CFR 1.17(e) iii. Extension of time fee (37 CFR 1.136 and 1.17) iii. Other b. Check in the amount of \$	Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).								
ii. X Other									
b Enclosed i Amendment/Reply	i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on								
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Signature Date February 3, 2005	c. Payment by credit card (Form PTO-2038 enclosed)								
M. March S.	SIGNATURE OF APPLICANT ATTORNEY, OR AGENT REQUIRED								
Name (Print/Type) Kevin R. Spivak Registration No. 43,148									
	Name (Print/Type) Kevin R. Spivak Registration No. 43,148								

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DE JC	Effective on 12/08/2004.			Complete if Known							
) `` .	Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).		18).	Application Number		09/921,358					
3 2012	FEE TRAN	SMITTAL	L	Filing Date		April 14, 1999					
W 0 2	For FY 2005			First Named Inv	entor K	Kenji MASAKI					
42	10111	2003		Examiner Name		A.P. Bhatnagar					
By Se	Applicant claims small entity	status. See 37 CFR 1.27		Art Unit	623						
& IBA	TOTAL AMOUNT OF PAYMENT (\$) 790.00			Attorney Docket	No. 3	325772009600					
	METHOD OF PAYMENT (check all that apply)										
_	Check Credit Card	Money Order	None	Other (please identii	fy):					
•	x Deposit Account Deposit	Account Number: 03-195	2	Deposit Account Na	ne:	Morrison & Fo	perster LLP				
,	For the above-identified d	eposit account, the Direct	tor is I	nereby authorize	d to: (check	(all that apply)					
ŀ	x Charge fee(s) indica	ated below		Charge	e fee(s) indi	cated below, ex	cept for the f	iling fee			
	X Charge any addition	al fee(s) or any underpay	ment	of X Credit	any overpay	ments					
	fee(s) under 37 CFR 1.16 and 1.17										
	FEE CALCULATION										
	1. BASIC FILING, SEARCH, AND		SEA	RCH FEES	EYAMINI	ATION FEES					
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	2. EXCESS CLAIM FEES Fee Description						all Entity ee (\$)				
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	Each independent claim over 3 or	pende	nt claim more t	han in the o	riginal patent	200	100				
	Multiple dependent claims 360 18							180			
•	Total Claims Extra Claims	Fee (\$) F		id (\$)	<u>Mul</u>	tiple Depende					
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	3. APPLICATION SIZE FEE		0.0								
	If the specification and drawings						or small entity	_/)			
	for each additional 50 sheets					FR 1.16(s).					
	Total Sheets Extra Sh			ditional 50 or frac		<u>Fee (\$)</u>	Fee Paid				
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	SUBMITTED BY	7/1-1	T -								
	Signature	7 LUC		Registration No. Attorney/Agent)	43,148	Telephone	(703) 760-7	762			
	Name (Print/Type) Kevin R. Spiva	k -				Date	Eebruary 3. 2	2005			